

Please type a plus (+) sign inside this box

9200/GP/3101

PTO/SB/21 REV 1 (12/97)

Approved for use through 09/30/2000. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number 06/745,655 <i>29</i>
		Filing Date 22 December 2000
		First Named Inventor G. Bendak et al.
		Examiner Name Unknown
		Group Art Unit Unknown
Total Number of Pages in This Submission <i>3 + post card</i>	Attorney Docket Number AMCC4840	

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Checklist and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Power of Attorney, Revocation	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Information Disclosure Statement PTO Form 1449 (no.) cited references	<input type="checkbox"/> Change of Correspondence Address	<u>POSTCARD</u>
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> PTO Form 1533		
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		
Remarks: <i>RECEIVED MAR 02 2001 TO 500 MAIL ROOM</i>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual Name <i>Gerald W. Maliszewski Reg. No. 38,054 GRAY CARPENTER &amp; FREIDENRICH</i>
Signature <i>[Signature]</i>
Date <i>2/21/01</i>

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date:

Typed or printed name <i>Gerald W. Maliszewski</i>	Date <i>2/21/01</i>
Signature <i>[Signature]</i>	